AMENDED IN ASSEMBLY MAY 28, 2008
AMENDED IN ASSEMBLY MAY 23, 2008
AMENDED IN ASSEMBLY APRIL 10, 2008
AMENDED IN ASSEMBLY MARCH 28, 2008

CALIFORNIA LEGISLATURE—2007–08 REGULAR SESSION

## ASSEMBLY BILL

No. 2375

## Introduced by Assembly Member Hernandez (Coauthor: Assembly Member Berg)

February 21, 2008

An act to add Section 127162 to, and to add Chapter 1.5 (commencing with Section 127320) to Part 1 of Division 107 of, the Health and Safety Code, relating to public health.

## LEGISLATIVE COUNSEL'S DIGEST

AB 2375, as amended, Hernandez. Health professions workforce: master plan.

Existing law requires the Office of Statewide Health Planning and Development to take various actions related to statewide health planning and the development of policies to address health care issues in California.

This bill would require the office, in collaboration with the California Workforce Investment Board, to establish the Health Professions Workforce Task Force, comprised of specified members, to assist in the development of a health professions workforce master plan for the state, and would prescribe the functions and duties of the task force in that regard. The bill would require the task force to submit to the office recommendations for a statewide health professions workforce master

-2-**AB 2375** 

1

2

3

4

5

8

9

10 11

12

13

14

15

16

17

18

19

20

21

22

plan and for the office to implement a master plan no later than October <del>31, 2014</del>.

This bill would permit the office to request and collect specified information pertaining to the development and assessment of the state's health professions workforce.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. The Legislature finds and declares the following:

- (a) In order for California to remain healthy, prosperous, and globally competitive, the state needs to have a skilled health professions workforce.
- (b) Demographic trends and health care reimbursement structures are increasing gaps between health professions workforce supply and demand, as seen in the shortages of primary care providers.
- (c) California's population is aging, growing, and becoming increasingly more diverse. California's workforce of health professionals has not reflected these changes and is ill-equipped to reduce new pressures on the health care system.
- (d) Developing California's workforce so that it better represents and serves its consumer population will help to mitigate increasing health care costs.
- (e) California faces a dramatic and pressing challenge related to the supply and distribution of health care professionals. In addition to urban areas, rural areas face ongoing challenges to recruitment and retention.
- (f) There are existing statewide efforts to address these problems, which include, but are not limited to, the California Institute for Nursing and Health Care's Master Plan for the California Nursing
- 23 Workforce, the Mental Health Services Act (MHSA) Five-Year
- 24 Workforce Education and Training Development Plan, the creation
- 25 of a health care workforce and educational clearinghouse within
- 26 the Office of Statewide Health Planning and Development, 27
- publication of the report entitled "Connecting the Dots: California
- 28 Initiative to Increase Health Workforce Diversity" by the California
- 29 Health Professional Consortium, and others. However, there is no

-3-**AB 2375** 

coordinated plan of action effort to develop the state's health professions workforce. 3

2

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

- (g) A comprehensive approach to health professions workforce development is needed to ensure that the state has the optimal mix of culturally competent health professions workers to address health needs in a cost-effective manner.
- (h) To prepare the highly skilled workforce necessary and to keep California's economy competitive, maintain the income and quality of life for California residents, and increase tax revenues, the following issues must be addressed:
- (1) A comprehensive public and private collaboration to develop California's health professions workforce.
- (2) A state-level effort involving multiple health professions, business and labor, educational institutions including primary, secondary, and postsecondary institutions, state government workforce boards, regional leadership, consumers, and other stakeholders. These groups should work together to forecast health professions workforce demand and plan comprehensive pathways to support multiple target groups.
- (3) Health data collection and reporting on a continuous basis. SEC. 2. Section 127162 is added to the Health and Safety Code, to read:
- 127162. (a) The office shall, in collaboration with the California Workforce Investment Board and based on information provided by the health care workforce clearinghouse created by Section 128050, establish the Health Professions Workforce Task Force to assist in the development of a health professions workforce master plan for the state. The task force shall be comprised of the following members from both rural and urban areas:
- (1) Two members representing the Legislature, with one member appointed by the Speaker of the Assembly, and one member appointed by the Senate Rules Committee.
- (2) A member representing the University of California, appointed by the Governor.
- (3) A member representing the California State University, appointed by the Governor.
- (4) A member representing the California Community Colleges, appointed by the Governor.
- 39 (5) A member representing the State Department of Education, 40 as appointed by the Governor.

AB 2375 —4—

(6) A member responsible for leading a health sciences program in a school district, drawn from a pool of candidates selected by the Superintendent, as appointed by the Governor.

- (7) Three members representing key stakeholders from labor and the health care industry, as appointed by the Speaker of the Assembly.
- (8) Three members representing the health care industry in the state, as appointed by the Senate Committee on Rules.
- (9) Three members representing community-based organizations in the state, as appointed by the Committee on Rules.
- (10) Three members representing multiple health professions, including Allied Health, as appointed by the Speaker of the Assembly.
- (11) A member of the California Workforce Investment Board and a member of a regional workforce investment board, as appointed by the Governor.
- (b) Total membership of the task force shall be not more than 21 people.
- (c) Membership on the task force shall be voluntary and without compensation.
- (d) The task force shall assist the office in the development of a health professions workforce master plan, and shall meet no later than October 31, 2009, to do all of the following:
- (1) Report, assess impact, and review capacity and effectiveness of existing state and private programs to leverage funding resources and form new partnerships, foster shared learning, identify best practices, and minimize duplication of efforts.
- (2) Review local workforce investment plans and assess progress in meeting current health professions workforce needs.
- (3) Identify education and employment trends in the health professions.
- (4) Identify the top 10 health professions with the highest demand and develop a plan to meet that demand.
- (5) Recommend state policies needed to address the issues of health professions workforce shortage and distribution.
- (6) Compile, assess, and align with other strategic plans for developing California's workforce.
  - (e) The task force shall meet no less than three times per year.

\_5\_ AB 2375

(f) Not later than October 31, 2012, the task force shall submit a completed report to the office with recommendations for developing a health professionals workforce master plan.

- (g) The office shall act as the lead in coordinating the task force.
- (h) The office shall seek and accept funds from the federal government and private entities to support the activities of the task force.
- (i) Not later than October 31, 2014, the office shall implement the health professionals workforce master plan as developed by the task force.
- SEC. 3. Chapter 1.5 (commencing with Section 127320) is added to Part 1 of Division 107 of the Health and Safety Code, to read:

Chapter 1.5. Health Professions Workforce Planning

127320. (a) As the clearinghouse for state health professions workforce data, the office may request and collect information pertaining to the development and assessment of the state's health professions workforce.

- (b) The sharing and transfer of data shall be conducted with the appropriate privacy protections under state and federal law.
- (c) The office shall determine gaps in the health professions workforce data collection and request the appropriate state entities to prepare and collect the data required.